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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	<u> </u>	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Andrew First name S Middle name Jacobs Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Andrew Steven Jacobs	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9116	

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Debtor 1 Andrew S Jacobs Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		I have not used any business name or EINs. Business name(s) EIN	☐ I have not used any business name or EINs. Business name(s) EIN		
5.	Where you live	1019 Scioto St	If Debtor 2 lives at a different address:		
		Urbana, OH 43078 Number, Street, City, State & ZIP Code Champaign	Number, Street, City, State & ZIP Code		
Champaign County		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Andrew S Jacobs Debtor 1 Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When Case number District When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you? ☐ Yes.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of

No. Go to line 12.

this bankruptcy petition.

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Document Page 4 of 70 Andrew S Jacobs Case number (if known) Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to Chapter 11 of the proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, Bankruptcy Code, and are you a small business cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. debtor or a debtor as § 1116(1)(B). defined by 11 U.S.C. § 1182(1)? I am not filing under Chapter 11. ■ No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and ☐ Yes. I do not choose to proceed under Subchapter V of Chapter 11. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I ☐ Yes. choose to proceed under Subchapter V of Chapter 11. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property?

Number, Street, City, State & Zip Code

or a building that needs urgent repairs?

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Debtor 1 Andrew S Jacobs

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Den	Allulew 3 Jacobs				Oei (ii khown)			
Part	6: Answer These Questi	ions for Re	porting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b.					
			■ Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	owe that are not consumer debts or busing	ess debts			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapt	er 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	☐ Yes.		. Do you estimate that after any exempt pro available to distribute to unsecured creditor	operty is excluded and administrative expenses s?			
	administrative expenses		□No					
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do you estimate that you	■ 1-49		□ 1,000-5,000 □ 5001-10,000	□ 25,001-50,000 □ 50,001-100,000			
	owe?	☐ 50-99 ☐ 100-19 ☐ 200-99	· -	10,001-25,000	☐ More than100,000			
19.	How much do you estimate your assets to	□ \$0 - \$5	50,000 11 - \$100,000	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion			
	be worth?	■ \$100,001 - \$500,000		□ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion			
		□ \$500,001 - \$1 million		□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.	How much do you estimate your liabilities	□ \$0 - \$5		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	to be?		01 - \$100,000 001 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion			
			001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
Part	7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
				7, I am aware that I may proceed, if eligible relief available under each chapter, and I	e, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.			
If no attorney represents me and I did not pay or agree to pay someone document, I have obtained and read the notice required by 11 U.S.C. §					not an attorney to help me fill out this			
		I request	relief in accordance with the	e chapter of title 11, United States Code, sp	pecified in this petition.			
		bankrupto and 3571	y case can result in fines u	nt, concealing property, or obtaining money p to \$250,000, or imprisonment for up to 20	or property by fraud in connection with a pears, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		Andrew	S Jacobs of Debtor 1	Signature of Deb	tor 2			
		Executed	on June 30, 2021	Executed on				
			MM / DD / YYYY	M	M / DD / YYYY			

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Debtor 1 Andrew S Jacobs Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Stephen Malkiewicz	Date	June 30, 2021
Signature of Attorney for Debtor		MM / DD / YYYY
Stephen Malkiewicz 0078836		
Printed name		
Richard E. West Co. LPA		
Firm name		
195 E. Central Ave.		
Springboro, OH 45066		
Number, Street, City, State & ZIP Code		
Contact phone 937-601-0401	Email address	ecf@debtfreeohio.com
0078836 OH		
Bar number & State		

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Fill in this infor	mation to identify your	case:		
Debtor 1	Andrew S Jacobs	S		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				☐ Ch
				am

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	131,460.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	55,589.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	187,049.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	182,320.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	931.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	80,163.00
	Your total liabilities	\$	263,414.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	7,127.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,900.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other so	chedules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Andrew S Jacobs Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____8,570.67

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clain	1
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	931.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	931.00

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			Doc	ument Page 1	0 of 70			
Fill in this inforr	mation to identify your	case and th	is filing	g:				
Debtor 1	Andrew S Jacob	s						
Debtor 2	First Name	Middle	e Name	Last Name				
Spouse, if filing)	First Name	Middle	Name	Last Name				
Jnited States Ba	inkruptcy Court for the:	SOUTHER	N DIST	RICT OF OHIO				
Case number _								☐ Check if this is an amended filing
Schedul each category, s nink it fits best. B	e as complete and accura	e items. List a	e. If two	only once. If an asset fits married people are filing to his form. On the top of any	gether, both are	equally respon	sible for su	pplying correct
	Each Residence, Building nave any legal or equitable t 2.	<u></u>		Estate You Own or Have a				
.1 1019 Scio Street address,	to St if available, or other description		What	is the property? Check all the Single-family home Duplex or multi-unit building Condominium or cooperation	9	the amount of	any secure	aims or exemptions. Put d claims on <i>Schedule D:</i> ms Secured by Property.
Urbana City	OH 430 State	D78-0000 ZIP Code		Manufactured or mobile ho Land Investment property	me	Current value entire proper		Current value of the portion you own? \$131,460.0
					erty? Check one		simple, ten if known. ants With	rour ownership interest ancy by the entireties, o Right of
County	jn				and another	(see instru	ictions)	nmunity property
				p, Current on paymer n balance as of 5/15/2		7.00		
				your entries from Part 1 r here			·	\$131,460.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Case 3:21-bk-31146 Doc 1 Filed 06/30/21 Entered 06/30/21 16:15:51 Page 11 of 70 Document **Andrew S Jacobs** Case number (if known) Debtor 1 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Do not deduct secured claims or exemptions. Put Triumph Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Street Twin** Model: Debtor 1 only Creditors Who Have Claims Secured by Property. 2018 Debtor 2 only Current value of the Current value of the 490 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another Keep, Lien 8/15/2019 \$7,520.00 \$7,520.00 **Current on payments** ☐ Check if this is community property No Trade In Vehicle/Not (see instructions) Refinanced NADA value pulled on 6/23/2021 (Average Retail) lien is joint. 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$7.520.00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No ■ Yes. Describe..... Misc household goods and furnishings, including but not limited to: large and small appliances, kitchen, dining room, bedroom, living room furniture and furnishings, and lawn and garden. No \$6,650.00 one item valued more than \$400 Pool secured by loan \$34,520.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

Household Electronics which includes an iphone, 2 TVs and an **Amazon Echo**

\$1,500.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

☐ Yes. Describe.....

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Allulew 3 J	acobs Case number (in known)	
		and kayaks: carpentry tools:
		and kayaks, carpentry tools,
_		
Yes. Describe		
	Misc hobby and sports equipment. No one item valued more than	
	\$200 which includes a treadmill	\$200.00
	s chatauns ammunition and related equipment	
_	s, shotgans, animaniton, and related equipment	
Yes. Describe		
	Firearms: 1 AR15 1 AK47 and 1 9mm	\$1,500.00
	Theums. TARTS, LART und Lomin	<u> </u>
Clothes		
	lothes, furs, leather coats, designer wear, shoes, accessories	
_		
Yes. Describe		
	Misc wearing apparel. No one item valued more than \$20	\$900.00
⊒ No	ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, g	gold, silver
	Misc items of jewelry. No one item valued more than \$400 which includes a wedding ring and misc costume jewelry.	\$1,000.00
	hivda barasa	
_ ,	blids, noises	
_		
	Animals, Non-Farm which includes 1 dog	\$0.00
No		
		\$46,270.00
TOT I art 5. Write that	Humber Here	
A. Dosoribo Vour Eino	point Appare	
		Current value of the
		portion you own?Do not deduct secured claims or exemptions.
Cash		
	have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition	ion
Yes		
	iquipment for sports a Examples: Sports, photomusical instraction of the process	quipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; cances musical instruments No

Official Form 106A/B Schedule A/B: Property page 3

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Debtor 1	Andrew S Jacobs			Case number (if known)	
				Cash on hand	\$0.00
			certificates of deposit; shares the same institution, list each.	in credit unions, brokerage houses, a	and other similar
■ Yes	S		Institution name:		
	17.1.	Checking-xxx3533	Wright Patt Credit Union	n	\$1,794.00
	17.2.	Savings-xxx3533	Wright Patt Credit Union	n	\$5.00
	ls, mutual funds, or public nples: Bond funds, investme		ge firms, money market accou	nts	
■ No □ Yes	S	Institution or issuer name	:		
19. Non-		nterests in incorporated	d and unincorporated busine	esses, including an interest in an L	LC, partnership, and
No					
☐ Yes	s. Give specific information Nan	about them ne of entity:		% of ownership:	
Nego	<i>otiable instrument</i> s include p	ersonal checks, cashiers'	e and non-negotiable instrur decks, promissory notes, an to someone by signing or deli	d money orders.	
	s. Give specific information a	about them er name:			
Exar	ement or pension account mples: Interests in IRA, ERIS		, thrift savings accounts, or oth	ner pension or profit-sharing plans	
■ No □ Yes	s. List each account separate Type o	ely. of account:	Institution name:		
Your		s you have made so that	you may continue service or u	se from a company telecommunications companies, or o	others
■ No □ Yes	S		Institution name or individual	l:	
23. Annu	uities (A contract for a period	lic payment of money to y	ou, either for life or for a numb	per of years)	
■ No □ Yes	s Issuer nam	e and description.		• ,	
26 U.S	ests in an education IRA, in S.C. §§ 530(b)(1), 529A(b), a		ed ABLE program, or under	a qualified state tuition program.	
■ No □ Yes	S Institution n	ame and description. Sep	parately file the records of any	interests.11 U.S.C. § 521(c):	
25. Trust ■ No	s, equitable or future inter	ests in property (other t	than anything listed in line 1), and rights or powers exercisable	e for your benefit
	s. Give specific information	about them			
	nts, copyrights, trademark mples: Internet domain name		ner intellectual property om royalties and licensing agre	ements	
	s. Give specific information	about them			

page 4

Case 3:21-bk-31146 Doc 1 Filed 06/30/21 Entered 06/30/21 16:15:51 Page 14 of 70 Document Debtor 1 Andrew S Jacobs Case number (if known) 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: **Primerica** Term Life Ins. Policy Policy Number: 0432709159 **Spouse** \$0.00 Face Value: \$250,000.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim.......

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$1,799.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

■ No

35. Any financial assets you did not already list

☐ Yes. Give specific information..

Case 3:21-bk-31146 Doc 1 Filed 06/30/21 Entered 06/30/21 16:15:51 Page 15 of 70 Document **Andrew S Jacobs** Case number (if known) Debtor 1 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form

Part 8: 55. Part 1: Total real estate, line 2 \$131,460.00 Part 2: Total vehicles, line 5 \$7,520.00 Part 3: Total personal and household items, line 15 \$46,270.00 58. Part 4: Total financial assets, line 36 \$1,799.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$55,589.00 \$55,589.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$187,049.00

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this inform	nation to identify your	case:			
Debtor 1	Andrew S Jacobs	S			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case number				_	Check if this is an
					amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 1019 Scioto St Urbana, OH 43078 Ohio Rev. Code Ann. § \$145,425.00 \$131,460.00 2329.66(A)(1) **Champaign County** Keep, Current on payments 100% of fair market value, up to Loan balance as of 5/15/2021 any applicable statutory limit \$141,467.00 Line from Schedule A/B: 1.1

furnishings, including but not limited to: large and small appliances, kitchen, dining room, bedroom, living room furniture and furnishings, and lawn and garden. No one item valued more than \$400

Line from Schedule A/B: 6.1

100% of fair market value, up to any applicable statutory limit

2329.66(A)(4)(a)

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	\$1,500.00 100% of fair market value, up to any applicable statutory limit \$1,500.00 100% of fair market value, up to any applicable statutory limit \$1,500.00 100% of fair market value, up to any applicable statutory limit \$1,500.00 100% of fair market value, up to any applicable statutory limit \$900.00 100% of fair market value, up to any applicable statutory limit \$1,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
-	\$1,500.00 100% of fair market value, up to any applicable statutory limit \$200.00 100% of fair market value, up to any applicable statutory limit \$1,500.00 100% of fair market value, up to any applicable statutory limit \$900.00 100% of fair market value, up to any applicable statutory limit	2329.66(A)(4)(a) Ohio Rev. Code Ann. § 2329.66(A)(4)(a) Ohio Rev. Code Ann. § 2329.66(A)(4)(a) Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
	\$200.00 100% of fair market value, up to any applicable statutory limit \$200.00 100% of fair market value, up to any applicable statutory limit \$1,500.00 100% of fair market value, up to any applicable statutory limit \$900.00 100% of fair market value, up to any applicable statutory limit	2329.66(A)(4)(a) Ohio Rev. Code Ann. § 2329.66(A)(4)(a) Ohio Rev. Code Ann. § 2329.66(A)(4)(a) Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
- .	\$200.00 100% of fair market value, up to any applicable statutory limit \$1,500.00 100% of fair market value, up to any applicable statutory limit \$900.00 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(4)(a) Ohio Rev. Code Ann. § 2329.66(A)(4)(a) Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
	100% of fair market value, up to any applicable statutory limit \$1,500.00 100% of fair market value, up to any applicable statutory limit \$900.00 100% of fair market value, up to any applicable statutory limit	2329.66(A)(4)(a) Ohio Rev. Code Ann. § 2329.66(A)(4)(a) Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
	\$1,500.00 100% of fair market value, up to any applicable statutory limit \$900.00 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(4)(a) Ohio Rev. Code Ann. § 2329.66(A)(4)(a) Ohio Rev. Code Ann. §
	100% of fair market value, up to any applicable statutory limit \$900.00 100% of fair market value, up to any applicable statutory limit	2329.66(A)(4)(a) Ohio Rev. Code Ann. § 2329.66(A)(4)(a) Ohio Rev. Code Ann. §
- -	\$900.00 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(4)(a) Ohio Rev. Code Ann. §
	100% of fair market value, up to any applicable statutory limit	2329.66(A)(4)(a) Ohio Rev. Code Ann. §
	any applicable statutory limit	Ohio Rev. Code Ann. §
	\$1,000.00	
	100% of fair market value, up to any applicable statutory limit	(/ / / /
	\$500.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
	100% of fair market value, up to any applicable statutory limit	2020.00(A)(0)
	\$0.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
	100% of fair market value, up to any applicable statutory limit	
	\$1,294.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
	100% of fair market value, up to any applicable statutory limit	()()
)	0	100% of fair market value, up to any applicable statutory limit \$0.00 100% of fair market value, up to any applicable statutory limit \$1,294.00 100% of fair market value, up to any applicable statutory limit

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		Document	Page 18	of 70		
Fill in this inform	nation to identify you	ur case:	V			
Debtor 1	Andrew S Jaco	bs				
	First Name	Middle Name	Last Name		-	
Debtor 2					_	
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the	SOUTHERN DISTRICT OF OR	HIO		-	
Case number					_	
					amend	ded filing
Official Form	n 106D					
Schedule	D: Creditors	Who Have Claims	Secure	d by Propert	y	12/15
` ,	have claims secured b	y your property?				
☐ No. Check	this box and submit t	his form to the court with your other	r schedules. Y	ou have nothing else	to report on this form.	
<u> </u>		•		J	•	
Part 1: List Al	I Secured Claims					
		more than one secured claim, list the cr	oditor congratoly	Column A	Column B	Column C
for each claim. If me	ore than one creditor has	s a particular claim, list the other creditor	rs in Part 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2.1 Agua Fina	nce Inc	Describe the property that secures	the claim:			If any \$0.00
						
		,				
		As of the date you file the claim is:	Check all that			
	_	apply.	. Officer all triat			
		_				
Number, Street,	City, State & Zip Code	_ '				
Who owes the de	bt? Check one					
_	and the control of the control	_	mortgage or sec	cured		
Debtor 2 only		car loan)	mongage or sec	Juicu		
_ ′	btor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
At least one of th	ne debtors and another	☐ Judgment lien from a lawsuit	,			
Andrew S Jacobs First Name Middle Name Last Name Andrew S Jacobs First Name Middle Name Last Name Andrew S Jacobs First Name Middle Name Last Name Andrew S Jacobs First Name Middle Name Last Name Andrew S Jacobs First Name Middle Name Last Name Andrew S Jacobs First Name Middle Name Last Name Andrew S Jacobs First Name Middle Name Last Name Andrew S Jacobs Check if this is an amended filling Check if this						
	Opened 5/11/17					

3685

Last 4 digits of account number

Last Active

Date debt was incurred 5/07/21

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Debtor 1 Andrew S Jac	obs		Cas	se number (if known)		
First Name	Middle Nam	e Last Name	_	-		
2.2 Freedom Road Fin	ancial I	Describe the property that secures	the claim:	\$6,333.00	\$7,520.00	\$0.00
Creditor's Name		2018 Triumph Street Twin 4		ψ0,333.00	ψ1,320.00	Ψ0.00
		Keep, Lien 8/15/2019				
		Current on payments				
		No Trade In Vehicle/Not Re	inanced			
	l l	NADA value pulled on 6/23/	2021			
		(Average Retail) lien is join	t.			
10605 Double R BI		As of the date you file, the claim is:	Check all that			
Reno, NV 89521		apply. Contingent				
Number, Street, City, State &		☐ Unliquidated				
		☐ Disputed				
Who owes the debt? Check		Nature of lien. Check all that apply.				
Debtor 1 only	I	☐ An agreement you made (such as	mortgage or secure	ed		
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2 only	i	☐ Statutory lien (such as tax lien, me	chanic's lien)			
At least one of the debtors a	and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates		Other (including a right to offset)	Motorcycle			
community debt		— Other (mordaling a right to onset)				
On	ened					
	19 Last					
	tive					
	9/21	Last 4 digits of account num	ber 6496			
Quicken Loans/Ro	cket					
Mortgage	Į.	Describe the property that secures	the claim:	\$141,467.00	\$131,460.00	\$10,007.00
Creditor's Name	•	1019 Scioto St Urbana, OH	43078			
		Champaign County				
		Keep, Current on payments				
		Loan balance as of 5/15/202	21			
PO Box 6577		\$141,467.00 As of the date you file, the claim is:	Chook all that			
Carol Stream, IL		apply.	Check all that			
60197-6577		☐ Contingent				
Number, Street, City, State &	Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt? Check	one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as	mortgage or secure	ed		
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2 only		Statutory lien (such as tax lien, me	echanic's lien)			
At least one of the debtors a	and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates community debt	to a	Other (including a right to offset)	Mortgage			
Date debt was incurred 03/	16/2021	Last 4 digits of account num	ber <u>6949</u>			
Add the dellar value of ver-	ontrine in Cal	umn A on this page. Write that nun	hor horo:	\$400 000 O	<u> </u>	
•		umn A on this page. Write that hun e dollar value totals from all pages		\$182,320.00		
Write that number here:	a. ioiiii, auu iii	o aonar value totalo irolli ali pages	•	\$182,320.00	D	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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				Document	Page	20 of a	70		
Fill	in this inform	nation to identify your	case:						
Del	otor 1	Andrew S Jacobs							
Der	OLOT 1	First Name		Name	Last Nam	9			
Deb	otor 2								
(Spo	use if, filing)	First Name	Middle	Name	Last Nam	Э			
Uni	ted States Bar	nkruptcy Court for the:	SOUTHER	RN DISTRICT OF	OHIO				
	se number							Charle	if this is an
(II KI	iowii)								if this is an ded filing
								1 americ	ica illing
Off	icial Form	n 106E/F							
Sc	hedule E	/F: Creditors W	ho Hav	e Unsecure	ed Claim	S			12/15
any o Sche Sche left.	executory contredule G: Executedule D: Credito Attach the Cont	I accurate as possible. Us racts or unexpired leases tory Contracts and Unexp ors Who Have Claims Sec tinuation Page to this pag nber (if known).	that could re ired Leases (ured by Prop	esult in a claim. Al (Official Form 1060 erty. If more space	so list executo G). Do not inclu e is needed, co	ry contrac ide any cre py the Par	ts on Schedule A/B: editors with partially t you need, fill it out,	Property (Official For secured claims that a number the entries i	m 106A/B) and on are listed in n the boxes on the
Par	t 1: List Al	l of Your PRIORITY Un	secured CI	aims					
1.	Do any credito	rs have priority unsecure	d claims aga	inst you?					
	☐ No. Go to Pa	art 2.							
	Yes.								
	possible, list the Part 1. If more t	pe of claim it is. If a claim hat claims in alphabetical orde han one creditor holds a partion of each type of claim, s	er according to rticular claim,	the creditor's name list the other creditor	e. If you have mors in Part 3.	ore than tw			
2.1	IRS			Last 4 digits of ac	count number	9116	\$931.00		
		editor's Name		Last 4 digits of as	oount number	3110		ψ331.00	Ψ0.00
	PO Box			When was the deb	ot incurred?	2020		_	
	Philadel	Iphia, PA 19101 reet City State Zip Code		As of the date you	ı filo the claim	ie: Chack	all that apply		
		I the debt? Check one.		Contingent	i ille, tile cialli	is. Check a	ан шасарріу		
	Debtor 1 or			_					
	_			☐ Unliquidated					
	Debtor 2 or	•		☐ Disputed					
	Debtor 1 a	nd Debtor 2 only		Type of PRIORITY		ıim:			
	☐ At least on	e of the debtors and anothe	er	☐ Domestic suppo	ort obligations				
	☐ Check if the	his claim is for a commu	nity debt	Taxes and certa	ain other debts y	ou owe the	government		
	Is the claim s	ubject to offset?		☐ Claims for death	h or personal in	ury while yo	ou were intoxicated		
	■ No			Other. Specify					_
	☐ Yes								
Par	t 2: List Al	l of Your NONPRIORIT	Y Unsecure	ed Claims					
		rs have nonpriority unsec							
٠.	_ '	ve nothing to report in this p		•	with your other	schodulos			
		e nothing to report in this p	ait. Jubiiiit (iii	S TOTAL TO THE COURT V	with your other:	ocieuules.			
	Yes.								
4.	unsecured claim	nonpriority unsecured cl n, list the creditor separately or holds a particular claim, li	y for each clai	m. For each claim li	isted, identify wl	nat type of o	claim it is. Do not list cl	aims already included	in Part 1. If more

Total claim

Part 2.

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Case number (if known)

Debt	Andrew 5 Jacobs		Case number (if known)	
4.1	Affirm Inc	Last 4 digits of account number	SBT4	\$154.00
	Nonpriority Creditor's Name 650 California St FI 12 San Francisco, CA 94108	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Unliquidated ☐ Disputed	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	Obligations arising out of a separeport as priority claims	·	
	Yes	Other. Specify		
4.2	Affirm Inc Nonpriority Creditor's Name	Last 4 digits of account number	51MW	\$108.00
	650 California St FI 12 San Francisco, CA 94108	When was the debt incurred?	Opened 08/20 Last Active 4/28/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset?	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecure ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	d claim: aration agreement or divorce that you did not	
	■ No □ Yes	Debts to pension or profit-sharin		
	☐ Yes	Other. Specify Unsecured		
4.3	Affirm Inc Nonpriority Creditor's Name	Last 4 digits of account number	E6CA	\$70.00
	650 California St Fl 12 San Francisco, CA 94108	When was the debt incurred?	Opened 09/20 Last Active 4/21/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset?	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecure ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	d claim: aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Unsecured	= -	
	☐ res	Other. Specify Unisecured		

Official Form 106 E/F

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Debte	or 1 Andrew S Jacobs		Case number (if known)	
4.4	Affirm Inc Nonpriority Creditor's Name	Last 4 digits of account number	LNA1	\$69.00
	650 California St FI 12 San Francisco, CA 94108	When was the debt incurred?	Opened 10/20 Last Active 4/09/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify _ Unsecured		
4.5	Affirm Inc	Last 4 digits of account number	FD88	\$50.00
	Nonpriority Creditor's Name	_	Opened 00/20 Leet Active	
	650 California St Fl 12 San Francisco, CA 94108	When was the debt incurred?	Opened 09/20 Last Active 4/08/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4.6	Affirm Inc	Last 4 digits of account number	J4FM	Unknown
	Nonpriority Creditor's Name		Opened 05/20 Last Active	
	650 California St Fl 12 San Francisco, CA 94108	When was the debt incurred?	4/11/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	∏ Yes	Other Specify Unsecured		

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Case number (if known)

Andrew 5 Jacobs	Case number (if known)	
AFFIRM-Celtic Bank	Last 4 digits of account number ZF4U	\$139.00
Nonpriority Creditor's Name 268 South State Street, Suite 300 Salt Lake City, UT 84111	When was the debt incurred? 04/2021	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Charge Account	
Affirm/Cross River Bank	Last 4 digits of account number SWUB	\$98.00
Nonpriority Creditor's Name 885 Teaneck Rd	When was the debt incurred? 3/2021	
Teaneck, NJ 07666	When was the dept incurred: 3/2021	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
No	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Charge Account	
Affirm/Cross River Bank	Last 4 digits of account number DFMQ	\$91.00
Nonpriority Creditor's Name 885 Teaneck Rd	When was the debt incurred? 3/2021	
Teaneck, NJ 07666 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	no of the date you me, the claim to. Oncok an that apply	
■ Debtor 1 only	☐ Contingent	
□ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Charge Account	

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Andrew S Jacobs		Case number (if known)	
Affirm/Cross River Bank	Last 4 digits of account number	2F2C	\$93.0
Nonpriority Creditor's Name 885 Teaneck Rd	When was the debt incurred?	1/2021	
Teaneck, NJ 07666 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	no or the date you me, the claim	o. Oncok all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Charge Acc	count	
Affirm/Cross River Bank	Last 4 digits of account number	L9UK	\$308.0
Nonpriority Creditor's Name 885 Teaneck Rd	When was the debt incurred?	12/2020	+
Teaneck, NJ 07666		12,2020	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	☐ Student loans	a ciaiii.	
☐ Check if this claim is for a community debt	<u></u>	ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	nation agreement of alveree that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Affirm/Cross River Bank	Last 4 digits of account number	51MW	\$82.0
Nonpriority Creditor's Name 885 Teaneck Rd	When was the debt incurred?	9/2020	
Teaneck, NJ 07666 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	• ,	,	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?		ration agreement or divorce that you did not	
■ No	report as priority claims Debts to pension or profit-sharin	o plans, and other similar debts	
☐ Yes	■ Other, Specify Charge Acc	count	

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Andrew S Jacobs		Case number (if known)	
Affirm/Cross River Bank	Last 4 digits of account number	VJ80	\$1
Nonpriority Creditor's Name 885 Teaneck Rd	When was the debt incurred?	2/2024	
885 теапеск ка Teaneck, NJ 07666	when was the debt incurred?	2/2021	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Charge Ac	count	
		SHTR-MOV	
Affirm/Cross River Bank	Last 4 digits of account number	<u>R</u>	\$1
Nonpriority Creditor's Name 885 Teaneck Rd Teaneck, NJ 07666	When was the debt incurred?	12/2020	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Charge Ac	count	
Affirm/Cross River Bank	Last 4 digits of account number	307Q	\$1
Nonpriority Creditor's Name			
885 Teaneck Rd Teaneck, NJ 07666	When was the debt incurred?	4/2021	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	☐ Debts to pension or profit-sharing		
☐ Yes	Other Specify Charge Ac	count	

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Debto	Andrew S Jacobs		Case number (if known)			
4.1 6	Affirm/Cross River Bank	Last 4 digits of account number	UBPO-NXK D	\$116.00		
	Nonpriority Creditor's Name 885 Teaneck Rd Teaneck, NJ 07666	When was the debt incurred?	3/2021			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecure	1 claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Student loans	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Charge Acc	count			
4.1	Affirm/Cross River Bank	Last 4 digits of account number	WFBK-CPT J	\$152.00		
<u>·</u>	Nonpriority Creditor's Name 885 Teaneck Rd	When was the debt incurred?	2/2021	, ,,,,,,,,		
	Teaneck, NJ 07666 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	■ Debtor 1 only	Contingent				
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed				
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Type of NONPRIORITY unsecured Student loans	d claim:			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Charge Acc	count			
4.1	Apple Card/gs Bank Usa Nonpriority Creditor's Name	Last 4 digits of account number	7799	\$4,573.00		
	Lockbox 6112 Philadelphia, PA 19170	When was the debt incurred?	Opened 09/19 Last Active 4/22/21			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing				
	☐ Yes	■ Other, Specify Credit Card	I			

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Debt	or i Andrew 5 Jacobs		Case number (if known)	
4.1 9	Cap1/cabelas	Last 4 digits of account number	1643	\$5,064.00
	Nonpriority Creditor's Name Po Box 31293 Salt Lake City, UT 84131	When was the debt incurred?	Opened 02/15 Last Active 5/06/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.2 0	Cap1/cabelas Nonpriority Creditor's Name	Last 4 digits of account number	1790	\$959.00
	Po Box 31293 Salt Lake City, UT 84131	When was the debt incurred?	Opened 02/20 Last Active 5/04/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.2 1	Capital One Bank Usa N	Last 4 digits of account number	3020	\$9,174.00
	Nonpriority Creditor's Name Po Box 31293 Salt Lake City, UT 84131	When was the debt incurred?	Opened 08/14 Last Active 5/22/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	No	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card		
	□ 169	Other. Specify Oreun Cart	•	

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Debto	r 1 Andrew S Jacobs		Case number (if known)	
4.2	Cbna	Last 4 digits of account number	6259	\$2,152.00
	Po Box 6497 Sioux Falls, SD 57117 Number Street City State Zip Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim	Opened 12/19 Last Active 4/24/21 is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing	aration agreement or divorce that you did not	
	□Yes	Other. Specify Credit Card	<u> </u>	
4.2	Cbna Nonpriority Creditor's Name Po Box 6497 Sioux Falls, SD 57117	Last 4 digits of account number When was the debt incurred?	Opened 11/20 Last Active 2/16/21	\$421.00
	Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Other. Specify Charge Acc	d claim: tration agreement or divorce that you did not g plans, and other similar debts	
4.2	Citizens One Nonpriority Creditor's Name One Citizens Plaza Providence, RI 02903 Number Street City State Zip Code	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim	6231 12/2019 is: Check all that apply	\$350.00
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin ☐ Other Specify Phone	aration agreement or divorce that you did not	

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Debtor	1 Andrew S Jacobs		Case number (if known)	
4.2 5	Comenity Bank/rh Nonpriority Creditor's Name	Last 4 digits of account number	6041	\$3,989.00
	Po Box 182789 Columbus, OH 43218	When was the debt incurred?	Opened 11/15 Last Active 05/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.2	Comenitybank/jcrew Nonpriority Creditor's Name	Last 4 digits of account number	1349	\$2,240.00
	Po Box 182789 Columbus, OH 43218	When was the debt incurred?	Opened 02/16 Last Active 5/06/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	ls the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.2	Comenitybank/wayfair Nonpriority Creditor's Name	Last 4 digits of account number	2965	\$1,405.00
	Po Box 182789 Columbus, OH 43218	When was the debt incurred?	Opened 09/19 Last Active 5/07/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sena	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement of divorce that you did flot	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Acc	count	

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4.0	Allulew 3 Jacobs		Case Humber (II known)	
4.2 8	Comenitybk/williamsnom	Last 4 digits of account number	6502	\$2,692.00
	Nonpriority Creditor's Name Po Box 182789 Columbus, OH 43218	When was the debt incurred?	Opened 09/17 Last Active 5/11/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing	ration agreement or divorce that you did not	
	Yes	Other. Specify Charge Acc		
4.2 9	Comenitycapital/build Nonpriority Creditor's Name	Last 4 digits of account number	2297	\$2,554.00
	Po Box 182789 Columbus, OH 43218	When was the debt incurred?	Opened 11/18 Last Active 5/03/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed	d alaten	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Charge Acc		
4.3 0	Discover Fin Svcs Llc Nonpriority Creditor's Name	Last 4 digits of account number	0415	\$12,521.00
	Pob 15316 Wilmington, DE 19850	When was the debt incurred?	Opened 05/16 Last Active 5/23/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other Specify Credit Card		

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Debtor	1 Andrew S Jacobs		Case number (if known)	
4.3	Equifor			\$0.00
1	Equifax Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00
	PO Box 740241	When was the debt incurred?		
	Atlanta, GA 30374	_		
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	_	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte	
	■ No			
	Yes	Other. Specify Notice only		
4.3	Experian	Last 4 digits of account number		\$0.00
2	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ0.00
	PO Box 2002	When was the debt incurred?		
	Allen, TX 75013			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	_	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plans, and other similar debts	
	Yes	Other. Specify Notice only		
4.3	Fnb Omaha	Last 4 digits of account number	9537	Unknown
3	Nonpriority Creditor's Name			
	P.o. Box 3412	When was the debt incurred?	Opened 10/14 Last Active 9/03/19	
	Omaha, NE 68197			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	∏ Yes	Other Specify Credit Card	Ī	

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4.3	Jpmcb Card	Look 4 digits of account number	6096	\$5,434.00
4	Nonpriority Creditor's Name	Last 4 digits of account number	Opened 09/19 Last Active	ψ3,737.00
	Po Box 15369 Wilmington, DE 19850	When was the debt incurred?	03/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	Is the claim subject to offset?	report as priority claims		
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card		
4.3 5	Lending Club Corp	Last 4 digits of account number	2321	\$9,788.00
	Nonpriority Creditor's Name 595 Market St San Francisco, CA 94105	When was the debt incurred?	Opened 04/19 Last Active 3/20/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4.3 6	Nordstrom/td Bank Usa Nonpriority Creditor's Name	Last 4 digits of account number	9521	\$395.00
	13531 E. Caley Ave Englewood, CO 80111	When was the debt incurred?	Opened 09/19 Last Active 04/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacktriangle At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plans, and other similar debts	
	☐ Yes	Other Specify Credit Card	İ	

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4.3	Syncb/crat	Last 4 digits of account number	1077	\$1,476.00
,	Nonpriority Creditor's Name Po Box 965022 Orlando, FL 32896	When was the debt incurred?	Opened 12/16 Last Active 5/03/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Charge Acc		
4.3 8	Syncb/lowes	Last 4 digits of account number	6754	\$2,385.00
	Nonpriority Creditor's Name Po Box 956005 Orlando, FL 32896	When was the debt incurred?	Opened 12/16 Last Active 5/04/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset?	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	d claim: rration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Charge Acc		
4.3 9	Syncb/ppc Nonpriority Creditor's Name	Last 4 digits of account number	7092	\$7,599.00
	Po Box 965005 Orlando, FL 32896	When was the debt incurred?	Opened 07/13 Last Active 4/05/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	d claim:	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other Specify Credit Card		

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1.4	Syncb/ppmc Nonpriority Creditor's Name	Last 4 digits of account number	5384	\$1,255.00
	Po Box 965005 Orlando, FL 32896	When was the debt incurred?	Opened 03/20 Last Active 05/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing	aration agreement or divorce that you did not	
	■ No □ Yes	Other. Specify Credit Card		
4.4 1	Thd/cbna	Last 4 digits of account number	8928	\$982.00
	Nonpriority Creditor's Name Po Box 6497 Sioux Falls, SD 57117	When was the debt incurred?	Opened 11/15 Last Active 5/06/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separations.	d claim: aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc		
4.4	Tractor Supply/cbna Nonpriority Creditor's Name	Last 4 digits of account number	5325	\$835.00
	Po Box 6497 Sioux Falls, SD 57117	When was the debt incurred?	Opened 05/16 Last Active 5/13/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	lacktriangle At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other Specify Charge Acc		
	Tes Tes	Other Specify Charge Acc	Juni	

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1 Andrew S Jacobs	Case number (if known)		
Trans Union LLC	Last 4 digits of account number	\$0.0	
Nonpriority Creditor's Name			
P.O. Box 6790 Fullerton, CA 92834	When was the debt incurred?		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
No	\square Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes	■ Other, Specify Notice only		

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	931.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	931.00
					Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		•	0.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$	
	6i.		6i.	Ф	0.00
	OI.	Other. Add all other nonpriority unsecured claims. Write that amount here.	OI.	\$	80,163.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	80,163.00

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Fill in this infor				
Debtor 1	Andrew S Jacobs			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				☐ Check if this is
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	Number	Olicci			
	City		State	ZIP Code	
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	-

Fill in th	nis information to identify you	case:		
Debtor 1	Andrew S Jacob	s		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if,		Middle Name	Last Name	
United S	States Bankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
_				
Case nu (if known)	ımber			☐ Check if this is an amended filing
∩ffi∧i	al Form 106H			
		lobtors		40/45
Sche	edule H: Your Cod	eptors		12/15
eople a ill it out our nar	re filing together, both are eq	ually responsible for supp e boxes on the left. Attach ı). Answer every question.	lying correct information. the Additional Page to thi	mplete and accurate as possible. If two married If more space is needed, copy the Additional Page, s page. On the top of any Additional Pages, write
		you are ming a joint odoo, c	to flot hot oldrer opedee de d	oddstor.
Y	'es			
	Vithin the last 8 years, have yo cona, California, Idaho, Louisiana			Community property states and territories include n, and Wisconsin.)
	lo. Go to line 3.			
_	es. Did your spouse, former spo	ouse, or legal equivalent live	with you at the time?	
			•	
in li For	ne 2 again as a codebtor only	if that person is a guarant	or or cosigner. Make sure	our spouse is filing with you. List the person shown you have listed the creditor on Schedule D (Official Use Schedule D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and 3	ZIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1	Megan A. Jacobs			■ Schedule D, line 2.3
	1019 Scioto Street			☐ Schedule E/F, line
	Urbana, OH 43078			☐ Schedule G
				Quicken Loans/Rocket Mortgage
3.2	Megan Jacobs			Cahadula D. lina 22
0.2	1019 Scioto Street			■ Schedule D, line
	Urbana, OH 43078			☐ Schedule C/I , line
				Freedom Road Financial
3.3	Megan Jacobs			■ Schedule D, line 2.1
	1019 Scioto St			☐ Schedule E/F, line
	Urbana, OH 43078			☐ Schedule G
				Agua Finance Inc

Fill in this informa	ation to identify your case:	
Debtor 1	Andrew S Jacobs	
Debtor 2 (Spouse, if filing)		
United States Ba	nkruptcy Court for the: SOUTHERN DISTRICT OF OHIO	
Case number (lf known)		Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter
Official Fo		13 income as of the following date: MM / DD/ YYYY
Schedule	e I: Your Income	12 <i>l</i> -

15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filling spouse
	If you have more than one job,	Employment states	■ Employed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	Flooring Contractor	Teacher
	Include part-time, seasonal, or self-employed work.	Employer's name	Carpets of Urbana	Urbana City Schools
Occupation may include student or homemaker, if it applies.		Employer's address	930 N. Main Street Urbana, OH 43078	711 Wood Street Urbana, OH 43078
		How long employed th	DOH: 6/1/1999	DOH: 6/1/2001

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 3,813.33 6,079.92 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 3,813.33 6,079.92

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Andrew S Jacobs	_	Case	number (<i>if k</i>	nown)			
				For	Debtor 1		For D	Debtor 2 or	
								filing spouse	
	Cop	by line 4 here	4.	\$	3,81	3.33	\$	6,079.92	
5.	List	t all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	74	7.63	\$	725.22	
	5b.	Mandatory contributions for retirement plans	5b.	\$		0.00	\$	851.18	
	5c.	Voluntary contributions for retirement plans	5c.	\$		0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	· · —		0.00	\$	0.00	
	5e.	Insurance	5e.			0.00	\$	316.32	
	5f.	Domestic support obligations	5f.	\$		0.00	\$	0.00	
	5g.	Union dues	5g.			0.00	\$	79.30	
	5h.	Other deductions. Specify: Life ins	5h.	· · —			+ \$	11.70	
		Accident		\$		0.00	\$	34.90	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_		7.63	\$	2,018.62	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,06	5.70	\$	4,061.30	
8.	List 8a.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0-	C			c	0.00	
	0h	monthly net income. Interest and dividends	8a. 8b.			0.00	\$	0.00	
	8b. 8c.	Family support payments that you, a non-filing spouse, or a dependen		Φ_		0.00	Φ	0.00	
	00.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	. 8c.	\$	(0.00	\$	0.00	
	8d.	Unemployment compensation	8d.			0.00	\$	0.00	
	8e.	Social Security	8e.	\$		0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$		0.00	\$	0.00	
	8g.	Pension or retirement income	8g.			0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.	+ \$_		0.00	+ \$	0.00	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.00	\$	0.00	
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	6 :	3,065.70	+ \$	4.06	61.30 = \$	7,127.00
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	`-	.,		1,121100
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedul ude contributions from an unmarried partner, members of your household, you er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not excify:	r depe					chedule J. 11. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certailies						- L	7,127.00
								Combin monthly	ea income
13.	Do :	you expect an increase or decrease within the year after you file this form No.	n?						
		Yes. Explain: Debtor anticipates no changes in income over r	ext 12	2 mon	ths.				

Official Form 106l Schedule I: Your Income page 2

Fill	in this information	on to identify yo	our case:					
Deb	tor 1	Andrew S Ja	cobs				k if this is: An amended filing	
	tor 2							ving postpetition chapter the following date:
(Spc	ouse, if filing)						is expenses as or	the following date.
Unit	ed States Bankrup	otcy Court for the	SOUTH	IERN DISTRICT OF OHIO	<u> </u>	1	MM / DD / YYYY	
	e number nown)							
Of	fficial For	m 106J						
Sc	chedule .	J: Your I	Exper	nses				12/15
Be info	as complete ar	nd accurate as re space is ne	possible.	. If two married people ar ch another sheet to this				
Par	t 1: Describ	e Your House	hold					
1.	_							
	■ No. Go to li		n a senar	ate household?				
	□ res. Does	Debtor 2 live i	ii a sepaii	ate nousenoia:				
		s. Debtor 2 mus	st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Debt	or 2.	
			_	, , ,				
2.	Do you have	dependents?	■ No					
	Do not list Deb Debtor 2.	otor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state th							□ No
	dependents na	ames.						☐ Yes
								□ No □ Yes
								□ No
								☐ Yes
								□ No
_	_							☐ Yes
3.		people other ti	han $_{f \Box}$	No Yes				
	yourself and	your depende	nts? —	100				
		e Your Ongoi					andamant in a Cha	
exp				uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
	value of such a ficial Form 106		d have inc	cluded it on Schedule I: \	our Income		Your exp	enses
4.		home owners any rent for the		ses for your residence. I or lot.	nclude first mortgag	e 4. \$		0.00
	If not include	d in line 4:						
	4a. Real es	tate taxes				4a. \$		0.00
		, homeowner's	-			4b. \$		0.00
				upkeep expenses		4c. \$		150.00
5.				dominium dues our residence, such as ho	me equity loans	4d. \$ 5. \$		0.00
٥.	aaitiviidi ill	•9~9~ payille	J. y.	i ooiaoiioo, suuli as IIU	oquity idalis	υ. ψ		0.00

	Andrew S Jacobs	Case num	ber (if known)	
Utilities				
6a. E	lectricity, heat, natural gas	6a.	\$	350.00
6b. V	Vater, sewer, garbage collection	6b.	\$	135.00
6c. T	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	375.00
6d. C	Other. Specify: Water Soft	6d.	\$	68.00
Food a	nd housekeeping supplies	7.	\$	600.00
Childca	are and children's education costs	8.	\$	0.00
	g, laundry, and dry cleaning	9.	\$	150.00
Person	al care products and services	10.	\$	150.00
	l and dental expenses	11.	\$	213.00
	ortation. Include gas, maintenance, bus or train fare.		· —	
	include car payments.	12.	\$	373.00
Entert a	inment, clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
Charita	ble contributions and religious donations	14.	\$	0.00
Insurar	nce.			
Do not i	include insurance deducted from your pay or included in lines 4 or 20.			
15a. L	ife insurance	15a.	\$	90.00
15b. ⊢	lealth insurance	15b.	\$	0.00
15c. V	'ehicle insurance	15c.	\$	96.00
15d. C	Other insurance. Specify:	15d.	\$	0.00
Taxes.	Do not include taxes deducted from your pay or included in lines 4 or 20.			
Specify		16.	\$	0.00
	nent or lease payments:			
17a. C	Car payments for Vehicle 1	17a.	·	0.00
	Car payments for Vehicle 2	17b.	\$	0.00
17c. C	Other. Specify:	17c.	\$	0.00
	Other. Specify:	17d.	\$	0.00
	ayments of alimony, maintenance, and support that you did not report as	40	c	0.00
	ed from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	·	
•	payments you make to support others who do not live with you.	4.0	\$	0.00
Specify		19.		
	eal property expenses not included in lines 4 or 5 of this form or on Sche	20a.		0.00
	Mortgages on other property			0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	Aaintenance, repair, and upkeep expenses	20d.	· —	0.00
	Iomeowner's association or condominium dues	20e.		0.00
	Specify: Swimming Pool	21.	+\$	627.00
	Filing Spouse Vehicle Lease/Honda		+\$	485.00
	iling Spouse Student Loan/Navient		+\$	59.00
	iling Spouse Credit Card Pmt./J Crew		+\$	45.00
	iling Spouse Mortgage Pmt./Quicken		+\$	917.00
	lling Chausa Daraanal Laan/Daakat Laana			
	iling Spouse Personal Loan/Rocket Loans		+\$	558.00
Non F	iling Spouse Personal Loan/Rocket Loans iling Spouse Credit Line/Paypal			558.00 72.00
Non Fi Non Fi			+\$	
Non Fi Non Fi non fil	iling Spouse Credit Line/Paypal ing spouse freedom debt for triumph		+\$	72.00
Non Fi Non Fi non fil Calcula	iling Spouse Credit Line/Paypal ing spouse freedom debt for triumph ate your monthly expenses		+\$ +\$ +\$	72.00 237.00
Non Fi Non Fi non fil Calcula 22a. Ad	iling Spouse Credit Line/Paypal ing spouse freedom debt for triumph ate your monthly expenses Id lines 4 through 21.		+\$ +\$ +\$	72.00
Non Finon file Calcular 22a. Ad 22b. Co	iling Spouse Credit Line/Paypal ing spouse freedom debt for triumph ate your monthly expenses Id lines 4 through 21. Applies 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		+\$ +\$ +\$	72.00 237.00 5,900.00
Non Finon fil Calcula 22a. Ad 22b. Co	iling Spouse Credit Line/Paypal ing spouse freedom debt for triumph ate your monthly expenses Id lines 4 through 21.		+\$ +\$ +\$	72.00 237.00
Non Finon file Calcular 22a. Ad 22b. Cd 22c. Ad	illing Spouse Credit Line/Paypal ing spouse freedom debt for triumph ate your monthly expenses Id lines 4 through 21. In pay line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Id line 22a and 22b. The result is your monthly expenses.		+\$ +\$ +\$	72.00 237.00 5,900.00
Non Finon file Calcular 22a. Ad 22b. Co 22c. Ad Calcular Calcular 22b. C	illing Spouse Credit Line/Paypal ing spouse freedom debt for triumph ate your monthly expenses Id lines 4 through 21. In pay line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Id line 22a and 22b. The result is your monthly expenses. Ate your monthly net income.	23a	+\$ +\$ +\$ \$ \$	72.00 237.00 5,900.00 5,900.00
Non Fi Non Fi non fil Calcula 22a. Ad 22b. Co 22c. Ad Calcula 23a. C	illing Spouse Credit Line/Paypal ing spouse freedom debt for triumph ate your monthly expenses Id lines 4 through 21. In pay line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Id line 22a and 22b. The result is your monthly expenses. In ate your monthly net income. In a complete income income. In a complete income In a complete income inco	23a. 23h	+\$ +\$ +\$ \$ \$ \$	72.00 237.00 5,900.00 5,900.00
Non Fi Non Fi non fil Calcula 22a. Ad 22b. Co 22c. Ad Calcula 23a. C	illing Spouse Credit Line/Paypal ing spouse freedom debt for triumph ate your monthly expenses Id lines 4 through 21. In pay line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Id line 22a and 22b. The result is your monthly expenses. Ate your monthly net income.	23a. 23b.	+\$ +\$ +\$ \$ \$ \$	72.00 237.00 5,900.00 5,900.00
Non Fi Non Fi non fil Calcula 22a. Ad 22b. Cd 22c. Ad Calcula 23a. Cd 23b. Cd	illing Spouse Credit Line/Paypal ing spouse freedom debt for triumph ate your monthly expenses Id lines 4 through 21. In pay line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Id line 22a and 22b. The result is your monthly expenses. In ate your monthly net income. In a copy line 12 (your combined monthly income) from Schedule I. In a copy your monthly expenses from line 22c above.		+\$ +\$ +\$ \$ \$ \$	72.00 237.00 5,900.00 5,900.00 7,127.00 5,900.00
Non Finon fill Calcula 22a. Ad 22b. Co 22c. Ad Calcula 23a. Co 23b. Co 23c. S	illing Spouse Credit Line/Paypal ing spouse freedom debt for triumph ate your monthly expenses Id lines 4 through 21. In pay line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Id line 22a and 22b. The result is your monthly expenses. In ate your monthly net income. In a copy line 12 (your combined monthly income) from Schedule I. It is copy your monthly expenses from line 22c above. In a copy your monthly expenses from your monthly income.	23b.	+\$ +\$ +\$ \$ \$ \$	72.00 237.00 5,900.00 5,900.00
Non Finon fill Calcula 22a. Ad 22b. Co 22c. Ad Calcula 23a. Co 23b. Co 23c. S	illing Spouse Credit Line/Paypal ing spouse freedom debt for triumph ate your monthly expenses Id lines 4 through 21. In pay line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Id line 22a and 22b. The result is your monthly expenses. In ate your monthly net income. In a copy line 12 (your combined monthly income) from Schedule I. In a copy your monthly expenses from line 22c above.	23b.	+\$ +\$ +\$ \$ \$ \$ -\$	72.00 237.00 5,900.00 5,900.00 7,127.00 5,900.00
Non Financial Non Financial Non File No	illing Spouse Credit Line/Paypal ing spouse freedom debt for triumph ate your monthly expenses Id lines 4 through 21. In pay line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Id line 22a and 22b. The result is your monthly expenses. In the your monthly net income. In the pay line 12 (your combined monthly income) from Schedule I. In the pay your monthly expenses from line 22c above. In the result is your monthly expenses from your monthly income. In the result is your monthly net income. In the result is your monthly net income.	23b. 23c. ou file this	+\$ +\$ +\$ \$ \$ \$ \$ \$ \$	72.00 237.00 5,900.00 5,900.00 7,127.00 5,900.00
Non Finon fill Calcula 22a. Ad 22b. Cd 22c. Ad Calcula 23a. Cd 23b. Cd 23c. Sd T Do you	illing Spouse Credit Line/Paypal ing spouse freedom debt for triumph ate your monthly expenses Id lines 4 through 21. In pay line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Id line 22a and 22b. The result is your monthly expenses. In the your monthly net income. In pay line 12 (your combined monthly income) from Schedule I. In pay your monthly expenses from line 22c above. In the result is your monthly net income. In expect an increase or decrease in your expenses within the year after your pays to you expect to finish paying for your car loan within the year or do you expect your pays to your pays to you expect your pays to you	23b. 23c. ou file this	+\$ +\$ +\$ \$ \$ \$ \$ \$ \$	72.00 237.00 5,900.00 5,900.00 7,127.00 5,900.00
Non Finon fill Calcula 22a. Ad 22b. Cd 22c. Ad Calcula 23a. Cd 23b. Cd 23c. Sd T Do you	illing Spouse Credit Line/Paypal ing spouse freedom debt for triumph ate your monthly expenses Id lines 4 through 21. In pay line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Id line 22a and 22b. The result is your monthly expenses. In the your monthly net income. In the pay line 12 (your combined monthly income) from Schedule I. In the pay your monthly expenses from line 22c above. In the result is your monthly expenses from your monthly income. In the result is your monthly net income. In the result is your monthly net income.	23b. 23c. ou file this	+\$ +\$ +\$ \$ \$ \$ \$ \$	72.00 237.00 5,900.00 5,900.00 7,127.00 5,900.00

page 2

Official Form 106J

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Debtor 1	Andrew S Jacobs	3			
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle Nome	Lost Nome		
Spouse if, filing)	FIRST Name	Middle Name	Last Name		
Inited States Ba	ankruptcy Court for the:	SOUTHERN DISTRIC	CT OF OHIO		
ase number					
known)					Check if this is an amended filing
Declaration of two married pour must file the	neople are filing together	r, both are equally res	ponsible for supplying corr	ect information.	12/1
	ey or property by fraud in the U.S.C. §§ 152, 1341, 1				nt, concealing property, or or imprisonment for up to 20
ars, or both. 1					
ars, or both. 1	18 U.S.C. §§ 152, 1341, 1	1519, and 3571.		n fines up to \$250,000, c	
ars, or both. 1	18 U.S.C. §§ 152, 1341, 1	1519, and 3571.	ankruptcy case can result ii	n fines up to \$250,000, c	
Sig Did you pa	18 U.S.C. §§ 152, 1341, 1	1519, and 3571.	ankruptcy case can result ii	ankruptcy forms? Attach Bankrup	or imprisonment for up to 20
Sig Did you pa No Yes. Under pena	gn Below ay or agree to pay some Name of person	eone who is NOT an at	ankruptcy case can result ii	ankruptcy forms? Attach Bankrup Declaration, an	or imprisonment for up to 20 tcy Petition Preparer's Notice, d Signature (Official Form 119
Did you pa No Yes. Under penathat they are	gn Below ay or agree to pay some Name of person alty of perjury, I declare	eone who is NOT an at	ankruptcy case can result in	ankruptcy forms? Attach Bankrup Declaration, an	or imprisonment for up to 20 tcy Petition Preparer's Notice, d Signature (Official Form 119
Did you pa No Yes. Under penathat they an X /s/ Andre	gn Below ay or agree to pay some Name of person alty of perjury, I declare re true and correct.	eone who is NOT an at	torney to help you fill out b	ankruptcy forms? Attach Bankrup Declaration, an	or imprisonment for up to 20 tcy Petition Preparer's Notice, d Signature (Official Form 119

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Fill	in this inform	nation to identify you	r case:			
	tor 1	Andrew S Jacob				
000		First Name	Middle Name	Last Name		
	tor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT (OF OHIO		
Cac	e number					
(if kno					_	heck if this is an mended filing
Off	icial For	rm 107				
			Affairs for Indivi	duals Filing for B	ankruptcy	4/19
infor	mation. If me	ore space is needed,	attach a separate sheet to		equally responsible for sup additional pages, write you	
	<u> </u>	i). Answer every ques etails About Your Ma	stion. irital Status and Where You	Lived Before		
		current marital statu				
	■ Married □ Not married	ried				
2.	During the la	st 3 vears. have you	lived anywhere other than	where you live now?		
_	_	,	,			
	■ No □ Yes. List	t all of the places you li	ived in the last 3 years. Do no	ot include where you live now	<i>r</i> .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory	
	■ No					
	_	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Pari	2 Explain	n the Sources of You	r Income			
	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part-		ndar years?
	□ No					
	_	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$15,840.00	■ Wages, commissions, bonuses, tips	\$34,402.09
			☐ Operating a business		☐ Operating a business	

Official Form 107

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De	btor 1	An	drew S J	acobs	Documer	J .	e number (if known)	
					Debtor 1		Debtor 2	
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
			dar year: December	31, 2020)	■ Wages, commissions, bonuses, tips	\$109,051.00	☐ Wages, commissions, bonuses, tips	
					☐ Operating a business		☐ Operating a business	
			dar year be December		■ Wages, commissions, bonuses, tips	\$104,861.00	☐ Wages, commissions, bonuses, tips	
					☐ Operating a business		☐ Operating a business	
		No Yes.	Fill in the d	etails.	Debtor 1		Debtor 2	
	and winn	other ings.	public bene If you are fi	efit payments ling a joint ca	ther that income is taxable. Ex- pensions; rental income; inte use and you have income that some from each source separa	rest; dividends; money collec you received together, list it c	ted from lawsuits; royalties; ar nly once under Debtor 1.	
	Ц	Yes.	Fill in the d	etails.	Debtor 1		Debtor 2	
					Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
Pa	rt 3:	List	Certain Pa	ayments You	u Made Before You Filed for	Bankruptcy		
6.	Are □	either No.	Neither D	ebtor 1 nor	2's debts primarily consume Debtor 2 has primarily conso a personal, family, or househo	umer debts. Consumer debts	s are defined in 11 U.S.C. § 10	01(8) as "incurred by ar
			During the	e 90 days bef Go to line	ore you filed for bankruptcy, d 7.	id you pay any creditor a tota	of \$6,825* or more?	
			□ Yes	paid that c not include	each creditor to whom you pa reditor. Do not include paymen payments to an attorney for to not on 4/01/22 and every 3 year	nts for domestic support oblig this bankruptcy case.	ations, such as child support a	and alimony. Also, do
	•	Yes.	Debtor 1	or Debtor 2	or both have primarily consu	umer debts.	,	
			_	·		ila you pay any oreallor a lola	i oi quou di more:	
			■ No.	Go to line		'd a catal at 0000	I the fatel area of the Color	ot and discorping
			□ Yes	include pa	each creditor to whom you pa yments for domestic support on this bankruptcy case.			

Total amount

paid

Amount you

still owe

Dates of payment

Creditor's Name and Address

Was this payment for ...

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Deb	otor 1	Andrew S Jacobs	Document	Page 45 of 70	e number (if known)	.0.0	
					, ,		
7.	Inside of whi	n 1 year before you filed for bankruptoers include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	rtners; relatives of any ge control, or owner of 20%	eneral partners; partners or more of their voting	erships of which yo g securities; and a	u are a gener ny managing a	al partner; corporations agent, including one for
		No Yes. List all payments to an insider. der's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for	this payment
3.	inside	n 1 year before you filed for bankruptoer? de payments on debts guaranteed or cos				ccount of a d	lebt that benefited an
	_	No					
		Yes. List all payments to an insider der's Name and Address	Dates of payment	Total amount	Amount you		this payment
				paid	still owe	include cred	ditor's name
Par	t 4:	Identify Legal Actions, Repossession	ns, and Foreclosures				
	modifi	Il such matters, including personal injury ications, and contract disputes. No Yes. Fill in the details.	cases, small claims actio	ns, divorces, collectio	n suits, paternity a	ctions, suppo	rt or custody
		e title e number	Nature of the case	Court or agency		Status of the	ne case
10.		n 1 year before you filed for bankrupto k all that apply and fill in the details belov		perty repossessed, f	oreclosed, garnis	hed, attache	d, seized, or levied?
		No. Go to line 11. Yes. Fill in the information below.					
	Cred	litor Name and Address	Describe the Property	1	Date		Value of the property
			Explain what happene	ed			ргоролту
11.	accou	n 90 days before you filed for bankrup unts or refuse to make a payment beca No Yes. Fill in the details.		cluding a bank or fir	nancial institution	, set off any	amounts from your
		litor Name and Address	Describe the action th	ne creditor took	Date taker	action was	Amount
12.		n 1 year before you filed for bankrupto -appointed receiver, a custodian, or a		perty in the possessi			efit of creditors, a
	_	No Yes					
Par	t 5:	List Certain Gifts and Contributions					
13.	Withi	n 2 years before you filed for bankrup	tcy, did you give any git	fts with a total value	of more than \$60	0 per person	?
	_	No Yes. Fill in the details for each gift.					

Person to Whom You Gave the Gift and Address:

Gifts with a total value of more than \$600

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Describe the gifts

Value

per person

Dates you gave the gifts

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Case number (if known)

14.	Within 2 years before you filed for bank	cruptcy, c	lid you give any gifts or contributions	s with a tota	I value of more than	\$600 to any charity?					
	■ No										
	Yes. Fill in the details for each gift or contribution.										
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co		Describe what you contributed		Dates you contributed	Value					
Par	t 6: List Certain Losses										
15.	Within 1 year before you filed for bankr or gambling?	uptcy or	since you filed for bankruptcy, did yo	ou lose anyt	hing because of thef	t, fire, other disaster					
	■ No										
	Yes. Fill in the details.										
	Describe the property you lost and	Descri	be any insurance coverage for the los	ss	Date of your	Value of property					
	how the loss occurred	Include	the amount that insurance has paid. Lisce claims on line 33 of Schedule A/B: F	st pending	loss	lost					
Par	t 7: List Certain Payments or Transfe	rs									
16.	Within 1 year before you filed for bankr	uptcy, di	d you or anyone else acting on your I	behalf pay o	r transfer any prope	rty to anyone you					
	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.										
	□ No										
	Yes. Fill in the details.										
	Person Who Was Paid	Date payment	Amount of								
	Address Email or website address Person Who Made the Payment, if Not	You	transferred		or transfer was made	payment					
	Richard E. West Co. LPA		Attorney Fees - Rest to be paid	6/18/2021	\$637.00						
	195 E. Central Ave.		the plan.								
	Springboro, OH 45066										
17.	Within 1 year before you filed for bankr promised to help you deal with your cru Do not include any payment or transfer the	editors o	r to make payments to your creditors		r transfer any prope	rty to anyone who					
	■ No										
	☐ Yes. Fill in the details.										
	Person Who Was Paid Address		Description and value of any prope transferred	rty	Date payment or transfer was made	Amount of payment					
18.	Within 2 years before you filed for bank transferred in the ordinary course of you Include both outright transfers and transfer include gifts and transfers that you have a	our busin rs made a	ess or financial affairs? as security (such as the granting of a sec		erty to anyone, othe						
	No										
	Yes. Fill in the details.										
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts	Date transfer was made					
	Person's relationship to you			paid iii GA	J. I.						

Debtor 1 Andrew S Jacobs

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Debtor 1 Andrew S Jacobs Case number (if known)

19.	beneficiary? (These are often called asset-protect		y property to a	seit-settie	a trust or similar device (or which you are a
	Yes. Fill in the details.					
	Name of trust	Description and v	alue of the pro	perty trans	sferred	Date Transfer was made
Pa	rt 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and St	orage Unit	s	
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associated to the second s	other financial accour	nts; certificates	of deposi		
	■ No □ Yes. Fill in the details.					
		ast 4 digits of ccount number	Type of acco instrument	unt or Date account was closed, sold, moved, or transferred		Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, a	ny safe de _l	posit box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?
22.	Have you stored property in a storage unit or p	,	home within 1	year befor	re you filed for bankrupto	y?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe	the contents	Do you still have it?
Pa	rt 9: Identify Property You Hold or Control for	r Someone Else				
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ude any proper	ty you bor	rowed from, are storing f	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Pa	rt 10: Give Details About Environmental Inform	nation				
For	the purpose of Part 10, the following definitions	s apply:				
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface	e water, ground			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa	•	environmental	law, wheth	er you now own, operate	, or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		as a hazardous	waste, ha	zardous substance, toxid	: substance,

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Andrew S Jacobs

Case number (if known)

24.	Has any governmental unit notified you that yo	ou may be liable or potentially liabl	e unde	r or in violation of an environme	ntal law?					
	■ No									
	Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State at ZIP Code)		Environmental law, if you now it	Date of notice					
25.	Have you notified any governmental unit of an	y release of hazardous material?								
	■ No □ Yes. Fill in the details.									
	Name of site	Governmental unit		invironmental law if you	Date of notice					
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State at ZIP Code)		invironmental law, if you now it	Date of Hotice					
26.	Have you been a party in any judicial or admin	istrative proceeding under any env	vironme	ental law? Include settlements a	nd orders.					
	■ No									
	Yes. Fill in the details.									
	Case Title Case Number	Court or agency Name		re of the case	Status of the case					
		Address (Number, Street, City, State and ZIP Code)								
Par	11: Give Details About Your Business or Co	nnections to Any Business								
27	Within 4 years hefers you filed for hankruntey	did you own a business or have a	ny of th	no following connections to any	husiness?					
27.	Within 4 years before you filed for bankruptcy	•	•	·	business?					
	☐ A sole proprietor or self-employed in a			-						
	☐ A member of a limited liability compan	y (LLC) or infinited hability partners	шр (сс	r)						
		☐ A partner in a partnership								
	☐ An officer, director, or managing exect	-	_							
	☐ An owner of at least 5% of the voting or equity securities of a corporation									
	No. None of the above applies. Go to Par	t 12.								
	Yes. Check all that apply above and fill in									
	Business Name D Address	escribe the nature of the business		Employer Identification number Do not include Social Security n	umber or ITIN.					
	(Number, Street, City, State and ZIP Code)	lame of accountant or bookkeeper								
28.	Within 2 years before you filed for bankruptcy, institutions, creditors, or other parties.	, did you give a financial statement	t to any	one about your business? Inclu	de all financial					
	■ No									
	Yes. Fill in the details below.									
	Name D Address (Number, Street, City, State and ZIP Code)	ate Issued								
	(radinosi, Street, Oity, State and AIF Gode)									

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Debtor 1 Andrew S Jacobs		Case number (if known)			
Part 12: Sign Below					
are true and correct. I understand	that making a false statement, concealing prope in fines up to \$250,000, or imprisonment for up	ts, and I declare under penalty of perjury that the answers erty, or obtaining money or property by fraud in connection to 20 years, or both.			
/s/ Andrew S Jacobs					
Andrew S Jacobs Signature of Debtor 1	Signature of Debtor 2				
Date June 30, 2021	Date				
Did you attach additional pages to	Your Statement of Financial Affairs for Individu	uals Filing for Bankruptcy (Official Form 107)?			
No					
□Yes					
Did you pay or agree to pay some	one who is not an attorney to help you fill out ba	ankruptcy forms?			

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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LBR Form 2016-1(b)

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO

In re: Andrew S Jacobs		Case No.
Andrew o duodos		Chapter 13
	Debtor(s)	Judge

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR AND APPLICATION FOR ALLOWANCE OF FEES IN CHAPTER 13 CASE

I. Disclosure

1.	Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that I at that compensation paid to me within one year before the filing of the petition services rendered or to be rendered on behalf of the debtor(s) in contemplation follows:	n in bankruptcy	, or agreed to be paid to me, for
F	or legal services, I have agreed to accept	\$	4,350.00
P	rior to the filing of this statement I have received	\$	637.00
В	alance Due	\$	3,713.00
 3. 	The source of the compensation paid to me was: ■ Debtor □ Other (specify): The source of compensation to be paid to me is: ■ Debtor □ Other (specify):		
4.	■ I have not agreed to share the above-disclosed compensation with any other associates of my law firm.	persons unless t	hey are members and/or
	☐ I have agreed to share the above-disclosed compensation with another perso of my law firm. A copy of the agreement, together with a list of the names of attached.		

II. Application

- 5. I hereby apply for an allowance of fees in the amount set forth above. I understand and agree that the Court may approve, without itemization, an allowance of fees not to exceed \$4,350, for rendering the legal services set forth below. If I seek payment of fees in excess of \$4,350, I will file a separate application that sets forth the total amount of the fee requested, and that includes an itemization of all legal services performed, the amount and itemization of any expenses for which reimbursement is sought, the identification and hourly billing rate of any attorney, paralegal, or other professional person for whom fees are sought, and the actual time spend by the attorney, paralegal, or other professional person for whom fees are sought.
 - a. Initial client interview, preparation and signing of any retainer or representation agreement, analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether, and under what chapter, to file a petition in bankruptcy;
 - b. Advising the debtor concerning his or her obligations and duties pursuant to the Code, the Rules, the Local Rules, applicable court orders, and provisions of his or her chapter 13 plan;
 - c. Preparation and filing of any document required by § 521 of the Code, including Official Form 122C-1 and Official Form 122C-2 (if applicable), the petition, schedules, statement of financial affairs and any amendments thereto that may be required;
 - d. Preparation and filing of the chapter 13 plan and any preconfirmation amendments thereto that may be required; provided, legal services performed relative to Paragraphs 5.4.1,5.4.2 and 5.4.3 of the chapter 13 plan are not covered by the no-look fee and may be compensated through a separate application for fees; however, in such event, no additional compensation

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will be allowed for the preparation and filing of a motion pursuant to Rule 5009(d).

- e. Preparation and filing of payroll orders and amended payroll orders, except amended payroll orders prepared in connection with the modification of a plan or the temporary suspension of payments;
- f. Representation of the debtor at the § 341 meeting of creditors and confirmation hearing, and at any adjournments thereof;
- g. Filing of address changes for the debtor;
- h. Review of claims;
- i. Review of notice of intention to pay claims;
- j. Preparation and filing of objections to non-real estate and non-tax claims, exclusive of any hearings;
- k. Preparation and filing of first motion to suspend or temporarily reduce plan payments;
- 1. Representation of the debtor in the submission of the annual tax return or the retaining of the tax refund pursuant to the Mandatory Form Chapter 13 Plan, exclusive of any subsequent inquiry, amendment, status report, motion, objection or hearing;
- m. Filing of a notice of final cure payment, when filed by the debtor, exclusive of any hearings;
- n. Preparation and filing of debtor's certification regarding issuance of discharge order;
- o. Routine phone calls and questions;
- p. File maintenance and routine case management; and
- q. Any other duty as required by local decision or policy.

Exemption planning and case review. Debtors are advised that there is no absolute right to reaffirm for market value, that they should be current on secured debt to reaffirm, and that they may reaffirm, surrender or redeem by payment, lump sum, of fair market value of collateral on secured debts. Representation is conditioned on compliance with the written fee agreement which the client signed. Debtors agree and understand that in the event that they fail to comply with the terms of the fee agreement, the attorneys may seek to withdraw from representation by making the appropriate application with the court.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

The client(s) agree(s) that the written fee agreement provides for all matters included and excluded. Clients agree that, in the event that the law firm has a schedule conflict, the firm may designate another attorney to appear at any hearing on behalf of client(s).

luna	30	2021

Date

/s/ Stephen Malkiewicz

Stephen Malkiewicz 0078836

Name

Richard E. West Co. LPA 195 E. Central Ave. Springboro, OH 45066 937-601-0401 Fax: 937-552-2138 ecf@debtfreeohio.com 0078836 OH Case 3:21-bk-31146 Doc 1 Filed 06/30/21 Entered 06/30/21 16:15:51 Desc Main Document Page 52 of 70

Other Provisions:

Debtor(s) and law firm may enter into an hourly fee agreement, instead of the "no-look" provisions, pursuant to LBR 2016-1 (b) (2) (C).

Fill in this information to identify your case:						
Debtor 1	Andrew S Jacobs					
Debtor 2 (Spouse, if filing)						
United States B	ankruptcy Court for the: Southern District of Ohio					
Case number (if known)						

Check	Check as directed in lines 17 and 21:						
1	ording to the calculations required by this tement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
•	Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
☐ 3. The commitment period is 3 years.							
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. ☐ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 4,063.33 6,240.34 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) 0.00 -\$ Ordinary and necessary operating expenses 0.00 0.00 Copy here -> \$ 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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	Andrew 5 Jacobs			Case numb	or (ii iuiowii,	<i></i>		
				Column A Debtor 1	-	Column E Debtor 2 non-filing	or	
7.	Interest, dividends, and royalties			\$	0.00	\$	0.00	
	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the Social Security Act. Instead, list it here		enefit unde	r				
	For you		0.00					
	For your spouse		0.00					
1	Pension or retirement income. Do not in benefit under the Social Security Act. Also not include any compensation, pension, particled States Government in connection with disability, or death of a member of the uniful pay paid under chapter 61 of title 10, then does not exceed the amount of retired pay if retired under any provision of title 10 others.	clude any amount received that, except as stated in the next seay, annuity, or allowance paid by with a disability, combat-related formed services. If you received include that pay only to the extent to which you would otherwise I	t was a entence, do by the injury or I any retired ent that it		0.00	\$	0.00	
	Income from all other sources not listed Do not include any benefits received unde under the Federal law relating to the nation under the National Emergencies Act (50 U coronavirus disease 2019 (COVID-19); parcrime, a crime against humanity, or internation compensation, pension, pay, annuity, or all Government in connection with a disability death of a member of the uniformed service separate page and put the total below.	r the Social Security Act; paymenal emergency declared by the I.S.C. 1601 et seq.) with respectyments received as a victim of ational or domestic terrorism; or llowance paid by the United Star, combat-related injury or disab	ents made President et to the a war etes illity, or	\$	0.00	-	0.00	
				\$	0.00	_ \$	0.00	
	Total amounts from separate pag	es, if any.	+	\$	0.00	\$	0.00	
	Calculate your total average monthly in- each column. Then add the total for Colum		sor \$	4,063.33	+ \$ _	6,240.34		,303.67
art 2	2: Determine How to Measure Your	Deductions from Income						ly income
	Copy your total average monthly incom						\$10	,303.67
	Calculate the marital adjustment. Check	: one:						
	You are not married. Fill in 0 below.							
	You are married and your spouse is f	iling with you. Fill in 0 below.						
	You are married and your spouse is r	not filing with you.						
	Fill in the amount of the income listed dependents, such as payment of the	spouse's tax liability or the spou				han you or yo		
								_
	Below, specify the basis for excluding adjustments on a separate page.			voted to ea	ch purpos	se. If necessar	ry, list additior	nal
			f income de	voted to ea		se. If necessar	ry, list additior	nal
	adjustments on a separate page. If this adjustment does not apply, enter		f income de		00	e. If necessar	ry, list additior	nal
	adjustments on a separate page. If this adjustment does not apply, enter NFS personal Loan	er 0 below.	f income de	558.	00	e. If necessar	ry, list additior	nal
	adjustments on a separate page. If this adjustment does not apply, enter NFS personal Loan NFS car payment	er 0 below.	f income de	558. 489.	00 00 00	e. If necessar	ry, list additior	nal
	adjustments on a separate page. If this adjustment does not apply, entended in the separate page. NFS personal Loan NFS car payment NFS student loan payment	er 0 below.	f income de	558. 489. 59.	00 00 00 00	ce. If necessar	ry, list additior	
14.	adjustments on a separate page. If this adjustment does not apply, enter NFS personal Loan NFS car payment NFS student loan payment NFS loan payment pool	er 0 below.	\$ \$ \$ \$ +\$	558. 489. 59. 627.	00 00 00 00		<u>-</u>	1,733.00 ,570.67
	adjustments on a separate page. If this adjustment does not apply, entended in the NFS personal Loan NFS car payment NFS student loan payment NFS loan payment pool Total	er 0 below. nt ct line 13 from line 12.	\$ \$ \$ + \$ \$	558. 489. 59. 627.	00 00 00 00		<u>-</u>	1,733.00

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Debtor 1	Andrew S Jacobs	Case number (if known)	
	Multiply line 15a by 12 (the number of months in a year).	Γ	x 12
15	b. The result is your current monthly income for the year for this pa	art of the form.	\$102,848.04_

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Debt	or 1	And	Irew S Jacobs		Case number (if known)		
16	calc	ulate	e the median family income that applies to	you. Follow thes	se steps:		
	16a	Fill i	n the state in which you live.	ОН			
	16b.	Fill i	n the number of people in your household.	2			
			the median family income for your state and	size of househo	 ld.	\$	67,059.00
			nd a list of applicable median income amounts uctions for this form. This list may also be ava		g the link specified in the separate	Ψ_	
17	. Hov		he lines compare?	liable at the ban	kruptcy cierk's office.		
	17a.		Line 15b is less than or equal to line 16c. 0 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N		ge 1 of this form, check box 1, <i>Disposable ir</i> ulation of Your Disposable Income (Official I		
	17b.			ulation of Your	form, check box 2, Disposable income is d Disposable Income (Official Form 122C-2		
Par	t 3:	Ca	Iculate Your Commitment Period Under 11	U.S.C. § 1325(I	p)(4)		
18.	Сор	у уоі	ur total average monthly income from line 1	I1.		\$	10,303.67
19.	cont	end t	ne marital adjustment if it applies. If you are hat calculating the commitment period under 1 income, copy the amount from line 13.				
	•		e marital adjustment does not apply, fill in 0 on	line 19a.		-\$	1,733.00
	19b.	Sub	tract line 19a from line 18.			\$	8,570.67
20.	Cald	ulate	e your current monthly income for the year.	. Follow these s	teps:		0.570.67
	20a	Cop	y line 19b			\$_	8,570.67
		Mult	iply by 12 (the number of months in a year).			_	x 12
	20b.	The	result is your current monthly income for the y	ear for this part	of the form	\$_	102,848.04
	20c.	Cop	y the median family income for your state and	size of househo	ld from line 16c	\$_	67,059.00
	04		, do the lines command				
	21.	_	do the lines compare?				
			Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4.	ise ordered by th	ne court, on the top of page 1 of this form, ch	neck box 3,	The commitment
			Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	nless otherwise	ordered by the court, on the top of page 1 of	this form, o	heck box 4, The
Par	t 4:	Si	gn Below				
	By s	ignin	g here, under penalty of perjury I declare that	the information of	on this statement and in any attachments is	true and co	rect.
)	(/s/	And	rew S Jacobs				
			v S Jacobs re of Debtor 1				
	•		ne 30, 2021				
		MN	I/DD/YYYY				
	•		ecked 17a, do NOT fill out or file Form 122C-2		o OO of that form		15 4.4 1
	If yo	u che	cked 17b, fill out Form 122C-2 and file it with	tnis form. On lin	e ਤੁਤ ਹਾ that form, copy your current monthly	income from	n iine 14 above.

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Fill in	this information	to identif	y your case	e:											
Debto	r 1 Andre	w S Jaco	bs												
Debto (Spou	r 2 se, if filing)						_								
` '	I States Bankrupto	cy Court fo	r the: Sout	hern Distric	t of Ohio										
Case (if kno	number wn)									l Checl	k if this	is an	amende	ed filii	ng
	1 Form 122C-2 1 pter 13 Ca	alcula	ition of	Your	Dispo	osable	Inc	ome							04/19
To fill	out this form, you itment Period (Of	u will nee	d your com						Current I	Monthly	Incom	e and	Calculat	ion o	f
space	complete and acc is needed, attach onal pages, write	n a separa	te sheet to	this form, l	nclude th										
Part 1	Calculate Y	our Dedu	ctions from	Your Incom	me										
the	Internal Revenu questions in line ormation may also	es 6-15. To	find the IR	S standard	ls, go onli	ine using tl									
exp	duct the expense a enses if they are h C-1, and do not d	nigher thar	the standar	ds. Do not i	nclude an	y operating	expens	ses that y	ou subtr	acted fro	om inco				
If yo	our expenses diffe	r from moi	nth to month	, enter the a	verage ex	kpense.									
Not	e: Line numbers 1	-4 are not	used in this	form. These	e numbers	apply to in	formatio	on require	ed by a s	imilar fo	rm use	d in cha	apter 7 ca	ases.	
5.	The number of	people us	ed in deter	mining you	r deducti	ons from ir	ncome								
	Fill in the number plus the number of pe	of any ad	ditional depe	ndents who								2			
Nat	ional Standards	Y	ou must use	e the IRS Na	ational Sta	andards to a	nswer t	the questi	ions in lii	nes 6-7.					
6.	Food, clothing, Standards, fill in						ered in I	line 5 and	I the IRS	Nationa	al	\$		1	,292.00
7.	Out-of-pocket h the dollar amoun people who are 6 higher than this I	nt for out-o 65 or olde	f-pocket hea because o	Ith care. The Ider people	e number have a hi	of people is gher IRS all	split in	ito two ca e for healt	tegories	people	who a	re unde	r 65 and		

Official Form 122C-2

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Page 58 of 70 Document **Andrew S Jacobs** Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 2 7c. Subtotal. Multiply line 7a by line 7b. 136.00 Copy here=> 136.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 142 7e. Number of people who are 65 or older 0 7f. Subtotal. Multiply line 7d by line 7e. 0.00 0.00 Copy here=> 7g. Total. Add line 7c and line 7f 136.00 Copy total here=: 136.00 Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 645.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 807.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment **Quicken Loans/Rocket Mortgage** 917.03 Сору Repeat this amount 917.03 917.03 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 0.00 0.00 or rent expense). If this number is less than \$0, enter \$0. here=>

affects the calculation of your monthly expenses, fill in any additional amount you claim.

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and

0.00

Explain why:

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Debtor 1	Andrew S Jacobs			Case number	if known)		
11.	Local transportation expenses: Check the number of v	ehicles for w	hich you claim	an ownersh	p or operating	g expense.	
	☐ 0. Go to line 14.						
	■ 1. Go to line 12.						
	☐ 2 or more. Go to line 12.						
12.	Vehicle operation expense: Using the IRS Local Stand operating expenses, fill in the <i>Operating Costs</i> that apply						201.00
13.	Vehicle ownership or lease expense: Using the IRS Lo You may not claim the expense if you do not make any lo more than two vehicles.						
Vel	Describe Vehicle 1: 2018 Triumph Stree Current on paymen NADA value pulled	ts No Trade	e In Vehicle/I	Not Refina	nced		
13a.	Ownership or leasing costs using IRS Local Standard			. \$	533.00		
13b.	Average monthly payment for all debts secured by Vehic Do not include costs for leased vehicles.	le 1.					
	To calculate the average monthly payment here and on I are contractually due to each secured creditor in the 60 r bankruptcy. Then divide by 60.			at			
	Name of each creditor for Vehicle 1	Averaç payme	ge monthly ent				
	Freedom Road Financial	\$	105.55				
	Total Average Monthly Paymer	s	105.55	Copy here =>	-\$105	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less that	n \$0, enter \$0)	\$	427.45	Copy net Vehicle 1 expense here => \$	427.45
Vel	nicle 2 Describe Vehicle 2:						
13d.	Ownership or leasing costs using IRS Local Standard			. \$	0.00		
13e.	Average monthly payment for all debts secured by Vehic leased vehicles.	le 2. Do not i	nclude costs fo	r			
	Name of each creditor for Vehicle 2	Averaç payme	ge monthly ent				
		\$					
	Total average monthly paymen	t \$		Copy here => -\$	0.0	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense					Copy net	
	Subtract line 13e from line 13d. if this number is less that	n \$0, enter \$0	0	\$	0.00	Vehicle 2 expense here => \$	0.00
14.	Public transportation expense: If you claimed 0 vehic Public Transportation expense allowance regardless					 n the \$	0.00
15.	Additional public transportation expense: If you claim also deduct a public transportation expense, you may fill not claim more than the IRS Local Standard for Public T	in what you b	pelieve is the ap				0.00

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Debtor 1 Andrew S Jacobs Case number (if known)

	er Necessary Expenses	In addition to the expense the following IRS categoria		s listed above	, you are allowed your monthly expenses	s for		
16.	self-employment taxes, so	d local taxes, such as income taxes, clude the monthly amount withheld from nust divide the expected refund by 12 for taxes.	\$	1,554.72				
17.	Involuntary deductions:	quires, such as retirement						
	contributions, union dues, a Do not include amounts tha	\$	952.94					
18.	Life Insurance: The total r							
	filing together, include pays Do not include premiums for of life insurance other than	\$	11.70					
19.	Court-ordered payments: administrative agency, suc	n as spousal or child suppo	ort paymen	ts.	•	\$	0.00	
20	Education: The total mont	-			You will list these obligations in line 35.	Ψ_		
20.	as a condition for your j		reducation	Turat is citrion	roquirou.			
	for your physically or me	entally challenged depende	ent child if r	no public educ	ation is available for similar services.	\$	0.00	
21.	Childcare: The total month Do not include payments for			•	sitting, daycare, nursery, and preschool.	\$	0.00	
22.	that is required for the heal by a health savings account	th and welfare of you or yout. Include only the amount	our depende that is mor	ents and that is e than the tota		\$	0.00	
22	Payments for health insura	· ·			•	Ψ		
	23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.							
	4. Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23							
24.		llowed under the IRS exp	oense allo	wances.		\$	5,220.81	
	Add all of the expenses a Add lines 6 through 23. litional Expense Deduction		deduction	s allowed by th		\$	5,220.81	
Add	Add lines 6 through 23. litional Expense Deduction Health insurance, disabil	These are additional Note: Do not include ity insurance, and health	deductions any exper	s allowed by the see allowances count expen			5,220.81	
Add	Add lines 6 through 23. litional Expense Deduction Health insurance, disabilinsurance, disability insurance	These are additional Note: Do not include ity insurance, and health	deductions any exper	s allowed by the see allowances count expen	s listed in lines 6-24. ses. The monthly expenses for health		5,220.81	
Add	Add lines 6 through 23. litional Expense Deduction Health insurance, disabil insurance, disability insura your dependents.	These are additional Note: Do not include ity insurance, and health	deductions any exper savings a counts that	s allowed by these allowances ccount expending are reasonab	s listed in lines 6-24. ses. The monthly expenses for health		5,220.81	
Add	Add lines 6 through 23. litional Expense Deduction Health insurance, disabilinsurance, disability insural your dependents. Health insurance	These are additional Note: Do not include ity insurance, and health	deductions any expersion savings accounts that	s allowed by the see allowances ccount experiment are reasonab	s listed in lines 6-24. ses. The monthly expenses for health		5,220.81	
Add	Add lines 6 through 23. litional Expense Deduction Health insurance, disability insura your dependents. Health insurance Disability insurance	These are additional Note: Do not include ity insurance, and health	deduction: any exper savings a counts that	s allowed by the seallowances ccount experiment are reasonabe 316.32 34.90	s listed in lines 6-24. ses. The monthly expenses for health		5,220.81 351.22	
Add	Add lines 6 through 23. litional Expense Deduction Health insurance, disability insura your dependents. Health insurance Disability insurance Health savings account	These are additional Note: Do not include ity insurance, and health nce, and health savings actional amount?	deduction: any exper savings a counts that \$ + \$	s allowed by the seallowances allowances allowances are reasonabed 316.32 34.90 0.00	s listed in lines 6-24. ISSES. The monthly expenses for health ly necessary for yourself, your spouse, or	or		
Add	Add lines 6 through 23. litional Expense Deduction Health insurance, disabili insurance, disability insura your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this	These are additional Note: Do not include ity insurance, and health nce, and health savings actional amount?	deduction: any exper savings a counts that \$ + \$	s allowed by the seallowances allowances allowances are reasonabed 316.32 34.90 0.00	s listed in lines 6-24. ISSES. The monthly expenses for health ly necessary for yourself, your spouse, or	or		
Add: 25.	Add lines 6 through 23. litional Expense Deduction Health insurance, disability insura your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this No. How much do you yes Continued contributions continue to pay for the reas	These are additional Note: Do not include ity insurance, and health note, and health savings activated amount? To to the care of household conable and necessary car of your immediate family were considered to the care of your immediate family were considered.	savings a counts that \$ + \$ or family if e and supply who is unable.	s allowed by the seallowances allowances allowances allowances are reasonabed and a seallowances are reasonabed and a seallowances. The seallowances are reasonabed as a seallowance and a seallowances are reasonable as a seallowance are reasonable are reasonable are reasonable are reasonable are reasonable are reasona	c actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may	or		
25. 26.	Add lines 6 through 23. Ititional Expense Deduction Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this No. How much do your yes Continued contributions continue to pay for the reasyour household or member include contributions to an Protection against family	to the care of household conable and necessary car of your immediate family violence. The reasonably	savings a counts that \$ \$ + \$ or family if e and supp who is unable program.	s allowed by the seallowances occount expert are reasonable and are re	c actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may	or \$	351.22	

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Debtor 1	Andrew S Jacobs	Case numb	ber (if known)				
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance and	operating of	expenses	s on		
	If you believe that you have home energy on 8, then fill in the excess amount of home en	n line					
	You must give your case trustee documents amount claimed is reasonable and necessa	ation of your actual expenses, and you must show ry.	that the ad	ditional		\$	0.00
		ren who are younger than 18. The monthly expependent children who are younger than 18 years o					
	You must give your case trustee documenta claimed is reasonable and necessary and n						
	* Subject to adjustment on 4/01/22, and eve	ry 3 years after that for cases begun on or after th	e date of a	djustmen	t.	\$	0.00
		ne monthly amount by which your actual food and allowances in the IRS National Standards. That are in the IRS National Standards.					
		onal allowance, go online using the link specified i o be available at the bankruptcy clerk's office.	n the sepa	rate			
	You must show that the additional amount o	claimed is reasonable and necessary.				\$	0.00
	Continuing charitable contributions. The instruments to a religious or charitable orga	amount that you will continue to contribute in the finization. 11 U.S.C. § 548(d)(3) and (4).	form of cas	h or finar	ncial		
	Do not include any amount more than 15%	of your gross monthly income.				\$	0.00
	Add all of the additional expense deduct Add lines 25 through 31.	ions.			:	\$	351.22
	actions for Debt Payment						
lo T	pans, and other secured debt, fill in lines	ent, add all amounts that are contractually due to e					
	Mortgages on your home					verage ayment	monthly
33a.	Copy line 9b here				=> \$.y	917.03
	Loans on your first two vehicles				-		
33b.	0 " 10" !				=> \$		105.55
33c.					=> \$		0.00
33d.	List other secured debts:						
	e of each creditor for other secured debt	Identify property that secures the debt	incl	es payme ude taxes nsurance	5		
			_	No			
	Aqua Finance Inc	Pool secured by loan		Yes	\$		575.33
					•		
				No	•		
			□	Yes	\$		
				No			
				Yes	+\$		
33e	Total average monthly payment. Add lines	33a through 33d\$	1,59	7 91	Copy total here=>	\$	1,597.91

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Debtor 1	And	rew S Jacobs			Case	e number (if known)			
		debts that you listed in lir property necessary for yo				,			
	No.	Go to line 35.							
	Yes.	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill	ossession of your propert						
Name	of the	creditor	Identify property that s	ecures the deb	t	Total cure amount		Monthly amount	cure
-NO	NE-				\$		÷ 60 =	\$	
					ſ		Co	ру	
					Total	\$0.	00 tot	re=> \$	0.00
		owe any priority claims - s due as of the filing date o				at			
		Go to line 36.	r your summapley case	. 11 0.0.0. 3	007.				
	i	Fill in the total amount of a	all of these priority claims	. Do not includ	le current or				
		ongoing priority claims, su	•						
		Total amount of all past-	due priority claims			\$931.	00 ÷	60 \$ _	15.52
36. P r	ojecte	d monthly Chapter 13 pla	n payment			\$			
Of the To	fice of Exec find a li	nultiplier for your district as the United States Courts (foutive Office for United State ist of district multipliers that incl patructions for this form. This list	or districts in Alabama and s Trustees (for all other of udes your district, go online	d North Caroli districts). using the link sp	na) or by	x			
A۱	/erage	monthly administrative exp	ense			\$	Copy here=		
		of the deductions for debes 33e through 36.	ot payment.					\$	1,613.43
Total	Deduc	tions from Income							
38. A ¢	dd all d	of the allowed deductions							
		ne 24, All of the expenses a e allowances		\$	5,220.81	_			
		ne 32, All of the additional e			351.22	_			
C	Copy lir	ne 37, All of the deductions	for debt payment	+\$	1,613.43				
T	otal de	eductions		\$	7,185.46	Copy total her	e=>	\$	7,185.46

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or 1	Andrew S Ja	acobs			C	ase n	umber (i	f known)			
2:	Determine Y	our Disposable Income Under 11	U.S.C. § 132	5(b)(2)							
		current monthly income from line				d.			\$		8,570.6
60. Fill in any reasonably necessary income you receive for support for d children. The monthly average of any child support payments, foster care disability payments for a dependent child, reported in Part I of Form 122C-received in accordance with applicable nonbankruptcy law to the extent rean necessary to be expended for such child.					ments, or at you		\$		0.00	_	
em in 1	ployer withheld 11 U.S.C. § 541	d retirement deductions. The mon from wages as contributions for qu (b)(7) plus all required repayments S.C. § 362(b)(19).	alified retireme	ent plans, a	ıs specifie	ed	\$		0.00	_	
. Tot	tal of all deduc	tions allowed under 11 U.S.C. § 7	707(b)(2)(A). C	Copy line 3	3 here	=>	\$	7,18	5.46		
exp the	penses and you ir expenses. Yo	ecial circumstances. If special circ have no reasonable alternative, de ou must give your case trustee a de d documentation for the expenses.	scribe the spe	cial circum	stances a	and					
scri	be the special	circumstances		Amo	unt of exp	pens	se				
				\$							
				\$							
	\$										
			Total	\$	0.00		Copy here=>	\$		0.00	
Tot	tal adjustment	s. Add lines 40 through 43.			=>	\$	-	7,185.46	Co	ppy re=> - \$	7,185.4
	•	······································				L					
Ca	lculate your m	onthly disposable income under	§ 1325(b)(2).	Subtract lir	e 44 from	n line	39.			\$	1,385.21
3:	Change in I	ncome or Expenses									
hav tim you	ve changed or a e your case will u filed your petit	e or expenses. If the income in Fo are virtually certain to change after to be open, fill in the information belotion, check 122C-1 in the first column fill in when the increase occurred, a	he date you fil w. For examp in, enter line 2	ed your ba le, if the wa in the seco	nkruptcy i ges repoi and colum	petit rted nn, e	on and	d during the sed after)		
m	Line	Reason for change		Dat	e of chanç	ge		rease or crease?	A	mount of ch	nange
1220 1220 1220 1220 1220	C-2 C-1 C-2 C-1							Increase Decrease Increase Decrease Increase	\$		
1220 1220 1220	 C-1	_						Decrease Increase Decrease	\$ \$		

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Debtor 1	Andrew S Jacobs	Case number (if known)
Part 4:	Sign Below	
E	By signing here, under penalty of perjury you declare	e that the information on this statement and in any attachments is true and correct.
X	/s/ Andrew S Jacobs	
	Andrew S Jacobs Signature of Debtor 1	
Date	June 30, 2021 MM / DD / YYYY	
	IVIIVI / DD / IIIII	
1		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$78	administrative fee	
<u>+</u> \$15	trustee surcharge	
\$338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Affirm Inc Case 3:21-bk-31146 650 California St FI 12 San Francisco, CA 94108

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Wilmington, DE 19850

AFFIRM-Celtic Bank 268 South State Street, Suite 300 Salt Lake City, UT 84111 Comenitybank/wayfair Po Box 182789 Columbus, OH 43218 Lending Club Corp 595 Market St San Francisco, CA 94105

Affirm/Cross River Bank 885 Teaneck Rd Teaneck, NJ 07666 Comenitybk/williamsnom Po Box 182789 Columbus, OH 43218

Megan A. Jacobs 1019 Scioto Street Urbana, OH 43078

Apple Card/gs Bank Usa Lockbox 6112 Philadelphia, PA 19170 Comenitycapital/build Po Box 182789 Columbus, OH 43218

Megan Jacobs 1019 Scioto Street Urbana, OH 43078

Aqua Finance Inc 2600 Pine Ridge Blvd Wausau, WI 54401 Discover Fin Svcs Llc Pob 15316 Wilmington, DE 19850 Megan Jacobs 1019 Scioto St Urbana, OH 43078

Cap1/cabelas Po Box 31293 Salt Lake City, UT 84131 Equifax PO Box 740241 Atlanta, GA 30374 Nordstrom/td Bank Usa 13531 E. Caley Ave Englewood, CO 80111

Capital One Bank Usa N Po Box 31293 Salt Lake City, UT 84131 Experian PO Box 2002 Allen, TX 75013 Quicken Loans/Rocket Mortgage PO Box 6577 Carol Stream, IL 60197-6577

Cbna Po Box 6497 Sioux Falls, SD 57117 Fnb Omaha P.o. Box 3412 Omaha, NE 68197 Syncb/crat Po Box 965022 Orlando, FL 32896

Citizens One One Citizens Plaza Providence, RI 02903 Freedom Road Financial 10605 Double R Blvd Reno, NV 89521 Syncb/lowes Po Box 956005 Orlando, FL 32896

Comenity Bank/rh Po Box 182789 Columbus, OH 43218 IRS PO Box 7346 Philadelphia, PA 19101 Syncb/ppc Po Box 965005 Orlando, FL 32896 Thd/cbna Po Box 6497 Sioux Falls, SD 57117

Tractor Supply/cbna Po Box 6497 Sioux Falls, SD 57117

Trans Union LLC P.O. Box 6790 Fullerton, CA 92834